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## \*\* CONTINUING DATA \*\*\*\*\*

*mon 1/7*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*mon 1/7*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance.	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>K</i> <i>1/1</i> Examiner's Signature <i>1/7</i> Initials	NY	5	8	3

## ADDRESS

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## TITLE

Ink-jet printing with reduced cross-talk

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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